North Dakota State Board of Accountancy 215 N 3rd Street, Suite 202C Grand Forks ND 58203

REFERENCE FORM

l,		am applying to the ND State Board of Accountancy for:
		permission to take the CPA exam or transfer grades
		a CPA certificate by reciprocity
Please complete this reference form and seal it in an envelope, sign your name across the envelope seal, and return it to the applicant.		
	1.	How long have you known the applicant? In what capacity?
:	2.	Have you ever employed the applicant?
		If yes, was the applicant's work satisfactory?
;	3.	Have you had sufficient personal contact with the applicant to serve as a character reference? (If not, please stop here and return the form to the candidate.)
	4.	Do you consider the applicant honest and trustworthy? If not, please explain:
į	5.	Do you consider the applicant to be of good moral character? If not, please explain:
(6.	Are you aware of any felonies committed by the applicant? If yes, please explain:
	7.	Do you know of anything about the applicant that would reflect negatively on the applicant's moral character? If yes, please explain:
;	8.	Are you related to the applicant?
Name (printed)		
Name (printed) Position/Occupation		
Phone: Email:		
Business	Naı	me:
Address:		
City, State, Zip, Province, Country		
Signature	9	Date